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## AMENDMENT TRANSMITTAL FORM

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450Customer No.: 23696  
Attorney Docket No.: 010297  
In Re Application of: Mark LINDNER, et al.  
Serial Number: 09/994,189  
Filed: November 26, 2001  
Examiner: Huy Q. Phan  
Group Art Unit: 2687

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

| CLAIMS   | (a) Number<br>Remaining After<br>Amendment | (b) Highest<br>Number<br>Previously Paid<br>For | (c)<br>Extra<br>Claims | Large Entity Fee                      | Fee Paid |    |
|--|--|---|------------------------|---------------------------------------|----------|----|
| Total*   | 14   | 22  | 0                      | x \$18 =                              | \$       |    |
| Independent**  | 4  | 4   | 0                      | x \$86 =                              | \$       |    |
| Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |   |                        | \$290                                 | \$       |    |
| EXTENSION FEES   |  |   |                        | <input type="checkbox"/> One Month    | \$110    | \$ |
|  |  |   |                        | <input type="checkbox"/> Two Months   | \$420    | \$ |
|  |  |   |                        | <input type="checkbox"/> Three Months | \$950    | \$ |
| TERMINAL DISCLAIMER  |  |   |                        | \$130                                 | \$       |    |
|  |  |   |                        | TOTAL FEE                             | \$0      |    |

\*If the number in column a is less than 20, enter 0 in column c.

\*\*If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$\_\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
5. ☐ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$\_\_\_\_\_.
- The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: June 29, 2005

Signature: John L. Ciccozzi  
Reg. No. 48,984  
(858) 845-2611QUALCOMM Incorporated  
Attn: Patent Department  
5775 Morehouse Drive  
San Diego, California 92121-1714  
Telephone: (858) 658-5787  
Facsimile: (858) 658-2502

## CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

## MAILING

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Depositor's Name: Tami M. Procopio  
(type or print name)Date: June 29, 2005

## FACSIMILE

- ☐ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: \_\_\_\_\_

(type or print name)

Signature: 



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of )  
Mark LINDNER and ) For: SYSTEM AND METHOD FOR  
Rusty SANDERS ) TRAFFIC CHANNEL  
Serial No. 09/994,189 ) DORMANCY IN WIRELESS  
Filed: November 26, 2001 ) COMMUNICATION SOCKET  
MODE  
EXPEDITED PROCEDURE  
EXAMINING GROUP 2687  
Group No. 2687

AMENDMENT

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Corres. and Mail  
**BOX AF**

Dear Sir:

In response to the Final Office Action dated May 4, 2005, please amend the above-identified application as follows:

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**CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))**

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(type or print name)

Date: June 29, 2005

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